



Alcohol and Marijuana Control Office
550 W 7th Avenue, Suite 1600
Anchorage, AK 99501
alcohol.licensing@alaska.gov
<https://www.commerce.alaska.gov/web/amco>
Phone: 907.269.0350

Alaska Alcoholic Beverage Control Board

Master Checklist: Renewal Liquor License Application

Doing Business As:	Westmark Inn Skagway - Glacier Lounge	License Number:	5512
License Type:	Beverage Dispensary - Tourism Duplicate Seasonal		
Examiner:	<i>JoAnn</i>	Transaction #:	997647

Document	Received	Completed	Notes
AB-17: Renewal Application	12/19/18	12/19/18	
App and License Fees	12/19/18	12/19/18	

Supplemental Document	Received	Completed	Notes
Tourism/Rec Site Statement	12/19/18	12/19/18	
AB-25: Supplier Cert (WS)			
AB-29: Waiver of Operation			
AB-30: Minimum Operation			
AB-33: Restaurant Affidavit			
COI / COC / 5 Star			
FP Cards & Fees / AB-08a			
Late Fee			

Names on FP Cards:	
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	Yes	No
Selling alcohol in response to written order (package stores)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Mailing address and contact information different than in database (if yes, update database)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
In "Good Standing" with CBPL (skip this and next question for sole proprietor)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Officers and stockholders match CBPL and database (if "No", determine if transfer necessary)?	<input checked="" type="checkbox"/>	<input type="checkbox"/>

LGB 1 Response:

☐ Waive ☐ Protest ☐ Lapsed

LGB 2 Response:

☐ Waive ☐ Protest ☐ Lapsed



Alaska Alcoholic Beverage Control Board

Beverage Dispensary – Tourism License

Form AB-17d: 2019/2020 Renewal License Application

What is this form?

This renewal license application form is required for all individuals or entities seeking to apply for renewal of an existing beverage dispensary – tourism liquor license that will expire on December 31, 2018. All fields of this form must be complete and correct, or the application will be returned to you in the manner in which it was received, per AS 04.11.270 and 3 AAC 304.105. The Community Council field only should be verified/completed by licensees whose establishments are located within the Municipality of Anchorage or outside of city limits within the Matanuska-Susitna Borough.

This form must be completed correctly and submitted to the Alcohol & Marijuana Control Office (AMCO)'s main office, along with all other required documents and fees, before any renewal license application will be considered complete. Receipt and/or processing of renewal payments by AMCO staff neither indicates nor guarantees that an application will be considered complete, or that a license will be renewed.

Section 1 – Establishment and Contact Information

Enter information for the business seeking to have its license renewed. If any populated information is incorrect, please contact AMCO.

Licensee:	Westmark Hotels, Inc.	License #:	5512
License Type:	Beverage Dispensary - Tourism Duplicate Seasonal	Statute:	AS 04.11.400(d)
Doing Business As:	Westmark Inn Skagway-Glacier Lounge		
Premises Address:	3rd and Spring Street		
Local Governing Body:	Municipality of Skagway Borough		
Community Council:	Skagway Assembly		

Mailing Address:	Attn: Michelle Pipkin 450 3rd Ave W				
City:	Seattle	State:	WA	ZIP:	98119

Enter information for the individual who will be designated as the primary point of contact regarding this application. This individual must be a licensee who is required to be listed in and authorized to sign this application.

Contact Licensee:	David McGlottlin	Contact Phone:	(206) 336-5910
Contact Email:	dmcglottlin@hagroup.com		

Optional: If you wish for AMCO staff to communicate with individual who is not a licensee named on this form (eg: legal counsel) about this application and other matters pertaining to the license, please provide that person's contact information in the fields below.

Name of Contact:	Michelle Pipkin	Contact Phone:	(206) 336-6105
Contact Email:	mpipkin@hagroup.com		

**Form AB-17d: 2019/2020 Tourism Renewal License Application****Section 2 – Entity or Community Ownership Information**

This top subsection must be completed by any licensee that is a **corporation** or **LLC**. Corporations and LLCs are required to be in good standing with the Alaska Division of Corporations, Business & Professional Licensing (CBPL). This number is neither your EIN/tax ID number, nor your business license number. **You may view your entity's status or find your CBPL entity number by visiting the following site:** <https://www.commerce.alaska.gov/cbp/main/search/entities>

General partnerships and local governments should skip to the second half of this page. Licensees who directly hold a license as an individual or individuals should skip to Section 3.

Alaska CBPL Entity #:	5724D
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You must ensure that you are able to certify the following statement before signing your initials in the box to the right: Initials

I certify that this entity is in good standing with CBPL and that all current entity officials and stakeholders (listed below) are also currently and accurately listed with CBPL.

This subsection must be completed by any **community** or **entity**, including a corporation, limited liability company, partnership, or limited partnership, that is applying for renewal. If more space is needed, please attach additional completed copies of this page.

- If the applicant is a **corporation**, the following information must be completed for each **stockholder who owns 10% or more** of the stock in the corporation, and for each **president, vice-president, secretary, and managing officer**.
- If the applicant is a **limited liability organization**, the following information must be completed for each **member with an ownership interest of 10% or more**, and for each **manager**.
- If the applicant is a **partnership**, including a limited partnership, the following information must be completed for each **partner with an interest of 10% or more**, and for each **general partner**.

Important Note: The information provided in the below fields (including spelling of names, specific titles, and percentages held) must match that which is listed with CBPL. If one individual holds multiple titles mentioned in the bullets above, all titles must be listed for that individual on this application and with CBPL. Failure to list all required titles constitutes an incomplete application.

Name of Official:	See Attached				
Title(s):		Phone:		% Owned:	
Mailing Address:					
City:		State:		ZIP:	

Name of Official:					
Title(s):		Phone:		% Owned:	
Mailing Address:					
City:		State:		ZIP:	

Name of Official:					
Title(s):		Phone:		% Owned:	
Mailing Address:					
City:		State:		ZIP:	

Westmark Hotels, Inc Ownership

Holland America Line, Inc 450 3rd Ave W Seattle, WA 98119 (206) 281-3535	100% Ownership
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Westmark Hotels, Inc Officers

Stein Kruse 450 3rd Ave W Seattle, WA 98119	Director	0%	(206) 281-3535
Charles E Ball 450 3rd Ave W Seattle, WA 98119	President	0%	(206) 336-5980
Daniel Howard 24305 Town Center Drive Santa Clarita, CA 91355	Vice President and Secretary	0%	(661) 753-1564
Natalya Leahy 450 3rd Ave W Seattle, WA 98119	Senior Vice President/Treasurer	0%	(206) 626-9557
Paul Goodwin 450 3rd Ave W Seattle, WA 98119	Senior Vice President	0%	(206) 281-3535
David McGlothlin 450 3rd Ave W Seattle, WA 98119	Vice President	0%	(206) 336-5910

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**Form AB-17d: 2019/2020 Tourism Renewal License Application****Section 3 – Sole Proprietor Ownership Information**

This section must be completed by any licensee who directly holds the license as an **individual or multiple individuals** and is applying for license renewal. If more space is needed, please attach a separate sheet that includes all of the required information.

Entities should skip to Section 4. The following information must be completed for each licensee and each affiliate (spouse).

This individual is an: ☐ applicant ☐ affiliate (spouse)

Name:				Contact Phone:	
Mailing Address:					
City:		State:		ZIP:	
Email:					

This individual is an: ☐ applicant ☐ affiliate (spouse)

Name:				Contact Phone:	
Mailing Address:					
City:		State:		ZIP:	
Email:					

Section 4 – Alcohol Server Education

Read the line below, and then sign your initials in the box to the right of the statement:

Initials

I certify that all licensees, agents, and employees who sell or serve alcoholic beverages or check identification of a patron have completed an alcohol server education course approved by the ABC Board and keep current, valid copies of their course completion cards on the licensed premises during all working hours, as set forth in AS 04.21.025 and 3 AAC 304.465.

Section 5 – License Operation

Check a single box for each calendar year that best describes how this liquor license was operated:

2017 2018

The license was regularly operated continuously throughout each year.

<input type="checkbox"/>	<input type="checkbox"/>
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The license was regularly operated during a specific season each year.

<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
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The license was only operated to meet the minimum requirement of 240 total hours each calendar year.

If this box is checked, a complete copy of Form AB-30: Proof of Minimum Operation Checklist, and all necessary documentation must be provided with this application.

<input type="checkbox"/>	<input type="checkbox"/>
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The license was not operated at all or was not operated for at least the minimum requirement of 240 total hours each year, during one or both of the calendar years.

<input type="checkbox"/>	<input type="checkbox"/>
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If this box is checked, a complete copy of Form AB-29: Waiver of Operation Application and corresponding fees must be submitted with this application for each calendar year during which the license was not operated for at least the minimum requirement, unless a complete copy of the form (including fees) has already been submitted for that year.

**Form AB-17d: 2019/2020 Tourism Renewal License Application****Section 6 – Violations and Convictions****Applicant violations and convictions in calendar years 2017 and 2018:**

Yes No

Have any notices of violation (NOVs) been issued to this licensee in the calendar years 2017 or 2018?

☒ ☐

Has any person or entity named in this application been convicted of a violation of Title 04, of 3 AAC 304, or a local ordinance adopted under AS 04.21.010 in the calendar years 2017 or 2018?

☐ ☒

If "Yes" to either of the previous two questions, attach a separate page to this application listing all NOVs and/or convictions.

Section 7 – Certifications**Read each line below, and then sign your initials in the box to the right of each statement:**

Initials

I certify that all current licensees (as defined in AS 04.11.260) and affiliates have been listed on this application, and that in accordance with AS 04.11.450, no one other than the licensee(s) has a direct or indirect financial interest in the licensed business.

I certify that I have not altered the functional floor plan or reduced or expanded the area of the licensed premises, and I have not changed the business name or the ownership (including officers, managers, general partners, or stakeholders) from what is currently approved and on file with the Alcoholic Beverage Control (ABC) Board.

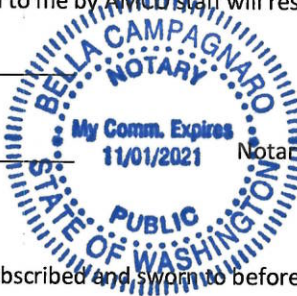
I certify on behalf of myself or of the organized entity that I understand that providing a false statement on this form or any other form provided by AMCO is grounds for rejection or denial of this application or revocation of any license issued.

I am submitting as part of this application a written statement that meets the attached Tourism Statement Guidelines, for review by the Alcoholic Beverage Control Board.

As an applicant for a liquor license renewal, I declare under penalty of perjury that I have read and am familiar with AS 04 and 3 AAC 304, and that this application, including all accompanying schedules and statements, is true, correct, and complete. I agree to provide all information required by the Alcoholic Beverage Control Board or AMCO staff in support of this application and understand that failure to do so by any deadline given to me by AMCO staff will result in this application being returned to me as incomplete.

Signature of licensee

Printed name of licensee



Signature of Notary Public

Notary Public in and for the State of

Washington

My commission expires:

11/01/2021

Subscribed and sworn to before me this 17 day of December, 2018.

Seasonal License? ☒ Yes ☐ No

If "Yes", write your six-month operating period: 4/15 - 10/15

License Fee:	\$ 1250.00	Application Fee:	\$ 300.00	TOTAL:	\$ 1550.00
Miscellaneous Fees:					
GRAND TOTAL (if different than TOTAL):					



Alcohol & Marijuana Control Office
550 W. 7th Ave, Suite 1600
Anchorage, AK 99501

Date: 3-21-17
Number AB17-0121
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Notice of Violation

(3AAC 304.525)

Licensee	License Number	Type of License
Westmark Hotels, Inc.	847	Beverage Dispensary
D.B.A.	How Delivered	Law Enforcement Agency
Solstice Cafe	VIA USPS 7013 2250 0000 9617 5170	Anchorage Police Department
Street or P.O. Box	City, State	Zip
800 5 th Ave, Suite 2600	Seattle, WA	98104

This is a notice to you as licensee that an alleged violation has occurred. If the Alcoholic Beverage Control Board decides to act against your license, under the provisions of AS 44.62.330 - AS 44.62.630 (Administrative Procedures Act) you will receive an Accusation and Notice of your right to an Administrative Hearing.

Note: This is not an accusation or a criminal complaint.

VIOLATION: On 3-15-17, this office became aware of an advertising banner from Solstice Cafe, license #847. The banner leads one to believe that during Fur Rondy / Iditarod, Alaskan Amber beer and Jack Daniels shots are available at special prices during the event. Had the banner also read, "Specials available all day every day" or listed a specific calendar week, this would have met the requirements of Title IV. (Pictures attached)

Your attention is directed to AS04.16.015: Pricing and marketing

You are directed to respond to the Alcohol Control Board in writing to this Notice of Violation within 10 days of receipt to explain what action you have taken to prevent a reoccurrence of this violation. FAILURE TO RESPOND TO THIS NOTICE OF VIOLATION WITHIN 10 DAYS WILL RESULT IN YOUR APPEARANCE, EITHER IN PERSON OR TELEPHONICALLY, BEFORE THE ABC BOARD AT THEIR NEXT REGULARLY SCHEDULED BOARD MEETING.

*Please include your Alcohol License Number in your response.

Sara Chambers, Acting Director
Alcohol & Marijuana Control Office
550 W. 7th Ave, Suite 1600
Anchorage, Alaska 99501

A Response is Required

3 AAC 304.525 (B) provides that upon receipt of a Notice of Violation, a licensee may request to appear before the Director and be heard regarding the Notice of Violation. The request must be made within ten days after receipt of the Notice and the Director must grant an appearance within ten days after receipt of a request. A Licensee shall respond, either orally or in writing, to the Notice.

Receipt:	Violation Observed By: F.R. Hamilton
Filed By: <i>FR Hamilton</i>	Title: Investigator III

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Westmark Inn Skagway

Tourism Statement

Westmark Inn Skagway is located in Skagway, Alaska and captures the spirit of the Klondike Trail with its Victorian décor, rustic setting and warm Alaskan hospitality. The Inn's 94 guestrooms accommodate travelers in turn-of-the-century style and is located adjacent to the Historic District and close to shopping and entertainment. For those wanting to explore and learn more about the area, the following attractions are within walking distance: Klondike Gold Dredge, the White Pass & Yukon Route Railroad, Skagway Museum and the National Park Service Visitor Center. The Skagway cruise ship dock as well as the ferry terminal are also within close proximity. The hotel is open from May through September for summer guests and celebrates The Chilkoot Room, Bonanza Bar & Grill and Glacial Lounge onsite for friendly service and fine food. As incentives to travelers, there is free ferry and airport pickup service (or free parking for those with vehicles) as well as acceptance of Alaska Airlines Mileage Plan and Westmark GuestRewards. Amenities include cable tv as well as in-room hair dryers and coffee makers. Free internet access is available in the lobby for hotel guests. There are no kitchen facilities within the guest rooms and no stocked alcoholic beverages in the rooms. Jim Sager is the General Manager for the Westmark Inn Skagway.

During the last two years, there has been an upgrade made to the Bonanza Bar as well as carpet replacement for the Chilkoot Dining Room. An espresso machine has also been added for additional beverage choices for guests.

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Details

ENTITY DETAILS

Name(s)

Type	Name
Legal Name	WESTMARK HOTELS, INC.

Entity Type: Business Corporation**Entity #:** 5724D**Status:** Good Standing**AK Formed Date:** 12/7/1962**Duration/Expiration:** Perpetual**Home State:** ALASKA**Next Biennial Report Due:** 1/2/2020**Entity Mailing Address:** ATTN: MICHELLE PIPKIN, 450 3RD AVE W, SEATTLE, WA 98119-4002**Entity Physical Address:** 450 3RD AVE W, SEATTLE, WA 98119-4002

Registered Agent

Agent Name: ROBERT BLASCO**Registered Mailing Address:** 9360 GLACIER HWY STE 202, JUNEAU, AK 99801**Registered Physical Address:** 9360 GLACIER HWY STE 202, JUNEAU, AK 99801

Officials

AK Entity #	Name	Titles	<input type="checkbox"/> Show Former Owned
	Charles E Ball	President	
	DANIEL HOWARD	Secretary, Vice President	
	David McGlothlin	Vice President	
	Holland America Line, Inc	Shareholder	100
	NATALYA LEAHY	Treasurer, Vice President	
	Paul Goodwin	Vice President	
	Stein Kruse	Director	